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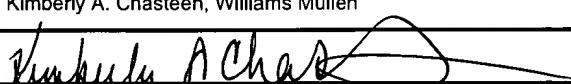
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/955,816
Filing Date	9/19/01
First Named Inventor	Lewis, Davidson
Art Unit	1744
Examiner Name	Spisich, Mark
Attorney Docket Number	035146.0002

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> in duplicate as auth. to charge dep. acct.  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input checked="" type="checkbox"/> Petition to Revive Unintentionally Abd. App. <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  -Additional statement declaring original response was filed 9/29/04 -Return receipt post card -Certificate of Mailing for this package
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Kimberly A. Chasteen, Williams Mullen		
Signature			
Printed name	Kimberly A. Chasteen		
Date	11 Jan 2005	Reg. No.	36,755

### CERTIFICATE OF TRANSMISSION/MAILING

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